

CLAIMS ONLY						Application Number 09 92 0236	Filing Date					
						Applicant(s)						
						* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1							51					
2							52					
3							53					
4							54					
5							55					
6							56					
7			1				57					
8			1				58					
9			1				59					
10			1				60					
11			1				61					
12			1				62					
13			1				63					
14			1				64					
15			1				65					
16			1				66					
17			1				67					
18			1				68					
19			1				69					
20			1				70					
21			1				71					
22			1				72					
23			1				73					
24			1				74					
25			1				75					
26			1				76					
27			1				77					
28			1				78					
29			1				79					
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31			1				81					
32			1				82					
33			1				83					
34			1				84					
35			1				85					
36			1				86					
37			1				87					
38			1				88					
39			1				89					
40			1				90					
41			1				91					
42			1				92					
43			1				93					
44			1				94					
45			1				95					
46			1				96					
47			1				97					
48			1				98					
49			1				99					
50			1				100					
Total Indep			9				Total Indep					
Total Depend			20				Total Depend					
Total Claims			21				Total Claims					